

# STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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Please type or print in Ink.	RECEIVED
NAME OF FILER (LAST)	(FIR8T) (MIDDLE)
Ablaza Ri	cardo
1. Office, Agency, or Court	
Agency Name (Do not use acronyms)	
City of Milpitas	
Division, Board, Department, District, If applicable	Your Position
Planning Commission	Commissioner
▶ If filing for multiple positions, list below or on an attachment	t. (Do not use acronyms)
Agency:	Position:
2. Jurisdiction of Office (Check at least one box)	
☐ State	☐ Judge or Court Commissioner (Statewide Jurisdiction)
——————————————————————————————————————	,
Multi-County	County of
⊠ City of Milpitas	Other
3. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2018, through December 31, 2018.	Leaving Office: Date Left/
The period covered is/	, through One The period covered is January 1, 2018, through the date of leaving office.
Assuming Office: Date assumed 6 / 26 / 201	9 -or-  The period covered is/, through the date of leaving office.
Candidate: Date of Electionand off	ice sought, if different than Part 1:
<ol> <li>Schedule Summary (must complete) ► Total</li> <li>Schedules attached</li> </ol>	al number of pages including this cover page:2
Schedule A-1 · Investments – schedule attached	Schedule C - Income, Loans, & Business Positions - schedule attached
Schedule A-2 - Investments - schedule attached	Schedule D - Income - Gifts - schedule attached
Schedule B - Real Property - schedule attached	Schedule E - Income - Gifts - Travel Payments - schedule attached
-or-	
☐ None - No reportable interests on any schedule	•
5. Verification	
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY STATE ZIP CODE
	Milpitas CA 95035
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS
( 408 ) 316-0793	
I have used all reasonable diligence in preparing this statement, herein and in any attached schedules is true and complete.	I have reviewed this statement and to the best of my knowledge the information contained acknowledge this is a public document.
I certify under penalty of perjury under the laws of the State	
Date Signed 7/29/2019	Signature / Selection
(manth, day, year)	Signature File the originally signed paper stategient with your sting official.)

#### **SCHEDULE A-2**

# Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Ricardo P. Ablaza

▶ 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
FIRST PACIFIC REDLESTATE	
FIRST PACIFIC REDLESTATE Name 603 CARLSBAD ST MICPITAS	Name
Address (Business Address Acceptable) CA 95031	Address (Business Address Acceptable)
Trust, go to 2 Business Entity, complete the box, then go to 2	Check one  ☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS REAL ESTATE BROKERAGE	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$0 - \$1,999 \$2,000 - \$10,000 \$2,000 - \$10,000	\$0 - \$1,999 \$2,000 - \$10,000//_18
\$10,001 - \$100,000 ACQUIRED DISPOSED	\$10,001 - \$100,000 ACQUIRED DISPOSED
T \$100,001 - \$1,000,000 Over \$1,000,000	1 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Partnership Sole Proprietorship Other	Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
□ \$0 - \$499 × \$10,001 - \$100,000	\$0 - \$499
☐ \$500 - \$1,000 ☐ OVER \$100,000 ☐ \$1,001 - \$10,000	\$500 - \$1,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF
None or Names listed below	INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)  None or Names listed below
185 PARALLON DR VALLETO CA 995	9 <u>0                                    </u>
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR
LEASED BY THE BUSINESS ENTITY OR TRUST  Check one box:	LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Dunisase Estituit Investment	
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if investment, or Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or	Description of Business Activity or
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000
\$10,001 - \$100,000/1 <u>8</u>	\$10,001 - \$100,000/18
\$100,001 - \$1,000,000 ACQUIRED DISPOSED  Over \$1,000,000	\$100,001 - \$1,000,000 ACQUIRED DISPOSED  Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached

Comments:\_\_

### CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

Please type or print in ink.

### STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

JUL 03 2019

A PUBLIC DOCUMENT

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(Seed)	gener	50	grass:	28	'S. #	Service.	MATERIAL .

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Ablaza	Ricardo	Р.
1. Office, Agency, or Court		
Agency Name (Do not use acronyms)		
City of Milpitas		
Division, Board, Department, District, if a	applicable	Your Position
Planning Commission		Commissioner
► If filing for multiple positions, list belo	ow or on an attachment. (Do not u	ise acronyms)
Agency:		Position:
2. Jurisdiction of Office (Check	at least one box)	
State		☐ Judge or Court Commissioner (Statewide Jurisdiction)
Multi-County		County of
☐ City of Milpitas		Other
E. Ony of		
3. Type of Statement (Check at le	east one box).	
Annual: The period covered is Jan December 31, 2018.	nuary 1, 2018, through	Leaving Office: Date Left/(Check one circle.)
The period covered is December 31, 2018.	, through	<ul> <li>The period covered is January 1, 2018, through the date of -or-</li> </ul>
★ Assuming Office: Date assumed  Output  Description:  Description	06 , 26 , 2019	The period covered is/, through the date of leaving office.
Candidate: Date of Election	and office sough	nt, if different than Part 1:
4. Schedule Summary (must consciously Schedules attached  Schedule A-1 - Investments - so Schedule A-2 - Investments - so	chedule attached	er of pages including this cover page:3   Schedule C - Income, Loans, & Business Positions – schedule attached  Schedule D - Income – Gifts – schedule attached
Schedule B - Real Property - s		Schedule E - Income – Gifts – Travel Payments – schedule attached
-or- None - No reportable in	terests on any schedule	
5. Verification		
MAILING ADDRESS STREET (Business or Agency Address Recommended - Pu.	CITY blic Document)	STATE ZIP CODE
455 E. Calaveras Blvd.	Milpitas	CA 95035
DAYTIME TELEPHONE NUMBER $(408)$ $316-079$	3	rpablaza a comcast. net
I have used all reasonable diligence in pherein and in any attached schedules is		riewed this statement and to the best of my knowledge the information contained e this is a public document.
I certify under penalty of perjury und	er the laws of the State of Califo	ornia that the foregoing is true and correct.
Data Signad June , 2019		Lesen -
Date Signed, 2019 (month, day, ye	ar)	Signature  (File the originally signed paper statement with your filing official.)

#### **SCHEDULE A-2**

# Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

700	
CALIFORNIA FORM	
FAIR POLITICAL PRACTICES COMMISSION	
Name	
Ricardo P. Ablaza	

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
FIRST PACIFIC REAL ESTATE	
603 CARUSBAD ST MUPITAS	Name
Address (Business Address Acceptable) CA 95031	Address (Business Address Acceptable)
Check one  Trust, go to 2  Business Entity, complete the box, then go to 2	Check one ☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
REAL ESTATE BROKERAGE	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
	\$0 - \$1,999 \$2,000 - \$10,000 \$2,000 - \$10,000
\$10,001 - \$100,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000	\$10,001 - \$100,000 ACQUIRED DISPOSED \$1,000,001 - \$1,000,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Partnership Sole Proprietorship Other	Partnership Sole Proprietorship Cother
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499 \$10,001 - \$100,000	\$0 - \$499 \$10,001 - \$100,000
☐ \$500 - \$1,000 ☐ OVER \$100,000 ☐ \$1,001 - \$10,000	
▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF
INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)  None or Names listed below	-INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)  None or Names listed below
185 PARALLON DR VALLETO CA 995	90
· · · · · · · · · · · · · · · · · · ·	
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR
LEASED BY THE BUSINESS ENTITY OR TRUST  Check one box:	LEASED BY THE BUSINESS ENTITY OR TRUST  Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, or	Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property	Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or	Description of Business Activity or
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property  I FAIR MARKET VALUE  IF APPLICABLE, LIST DATF:
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000	\$2,000 - \$10,000
\$10,001 - \$100,000	\$10,001 - \$100,000/18/18/18/
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Yrs. remaining  Check box if additional schedules reporting investments or real property	Yrs. remaining  Yrs. remaining  Check box if additional schedules reporting investments or real property
are attached	are attached
Comments:	FPPC Form 700 (2018/2019

### SCHEDULE C Income, Loans, & Business Positions (Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Ricardo P. Ablaza

1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
FIRST PACIFIC REAL ESTATE	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
603 CARUSBAD ST MILPITAS CO 950	<b>\$</b>
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
REAL ESTATE SALES	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
BROKER/OWNER,	<u> </u>
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
Partnership (Less than 10% ownership. For 10% or greater use	Partnership (Less than 10% ownership. For 10% or greater use
Schedule A-2.)	Schedule A-2.)
Sale of	Sale of
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
GO DAY DENI CROATE SQUEE	Tremai medine, his each source of \$10,000 or more
(Describe)	(Describe)
	Other
(Describe)	(Describe)
a retail installment or credit card transaction, made in t	I lending institution, or any indebtedness created as part of he lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
	%
ADDRESS (Business Address Acceptable)	
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Real PropertyStreet address
\$500 - \$1,000	Real Property  Street address  City
\$500 - \$1,000 \$1,001 - \$10,000	Street address
\$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000	Street address  City
\$500 - \$1,000 \$1,001 - \$10,000	Street address  City  Other
\$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000	Street address  City  Guarantor



#### STATEMENT OF ECONOMIC INTERESTS

#### **COVER PAGE**

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Please type or print in ink.

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NAME OF FILER (LAST)	(FIRST)		(MIDDLE)
Alcorn	Tim		
1. Office, Agency, or Cou	urt		
Agency Name (Do not use ac	ronyms)		
City of Milpitas			
Division, Board, Department, D	istrict, if applicable	Your Position	
Planning Commissione	r	Commissioner	
► If filing for multiple positions	s, list below or on an attachment. (Do not us	se acronyms)	
Agency:		Position:	
2. Jurisdiction of Office	(Check at least one box)		
State		☐ Judge or Court Commissioner (S	statewide Jurisdiction)
— ☐ Multi-County		County of	
· ·		Other	
Zi Oity of			
3. Type of Statement (CH	neck at least one box)	,	
December 31, 2	ored is January 1, 2018, through 2018.	Leaving Office: Date Left (Check on	
December 31, 2	ered is, through 2018.	<ul> <li>The period covered is Janua -or-</li> </ul>	ary 1, 2018, through the date of
Assuming Office: Date a	assumed	<ul><li>The period covered is</li><li>the date of leaving office.</li></ul>	, through
Candidate: Date of Elect	tion and office sough	t, if different than Part 1:	
A Calcadula Cumpany /			L
4. Schedule Summary (		r of pages including this cover p	age:
Schedules attached			
	•	Schedule C - Income, Loans, & Busine	
	ments – schedule attached	Schedule D - Income - Gifts - schedule	
Schedule B - Real Pro	operty - schedule attached	Schedule E - Income – Gifts – Travel F	rayments – scriedule attached
-or- □ None - No repor	table interests on any schedule		
5. Verification			
	TREET CITY	STATE	ZIP CODE
(Business or Agency Address Recomm		CA	95035
455 E. Calaveras Blvd  DAYTIME TELEPHONE NUMBER	., Wilipitas	EMAIL ADDRESS	33033
( 408 ) 586-3279			
	gence in preparing this statement. I have revibedules is true and complete. I acknowledg		knowledge the information contained
I certify under penalty of pe	rjury under the laws of the State of Califo	ornia that the foregoing is true and corre	ct.
Date Signed 3/12/	1101	Signature	
Date digited	month, day, year)	(File the originally signed paper s	tatement with your filing official.)

### SCHEDULE C Income, Loans, & Business **Positions**(Other than Gifts and Travel Payments)

CALIFORNIA FOR	
Name	

1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Christ community church	Western Seminary
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
1000 S.P VICTORIA DV.	1000 S.Parit Victoria Dr.
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Feichties assistant	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
	Tech services coordinator
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000 \$1,001 - \$10,000	☐ \$500 - \$1,000 <b>조</b> \$1,001 - \$10,000
\$10,001 - \$100,000	S10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of	Sale of
(Real property, car, boat, etc.)  Loan repayment	(Real property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
	1 1
(Describe)	(Describe)
Other	Other
	Other(Describe)
Other	CDescribe)  RIOD  al lending institution, or any indebtedness created as part of the lender's regular course of business on terms available to tatus. Personal loans and loans received not in a lender's
* You are not required to report loans from a commercia a retail installment or credit card transaction, made in the members of the public without regard to your official statement.	CDescribe)  RIOD  al lending institution, or any indebtedness created as part of the lender's regular course of business on terms available to tatus. Personal loans and loans received not in a lender's
Other	CDescribe)  RIOD  al lending institution, or any indebtedness created as part of the lender's regular course of business on terms available to tatus. Personal loans and loans received not in a lender's vs:
Other	Other
Cother (Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PE  * You are not required to report loans from a commercial a retail installment or credit card transaction, made in the members of the public without regard to your official stregular course of business must be disclosed as follow NAME OF LENDER*	Other
Cother (Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PE  * You are not required to report loans from a commercial a retail installment or credit card transaction, made in the members of the public without regard to your official stregular course of business must be disclosed as follow NAME OF LENDER*	Other
Other (Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PE  * You are not required to report loans from a commercia a retail installment or credit card transaction, made in the members of the public without regard to your official start regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)	Other
Other (Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PE  * You are not required to report loans from a commercia a retail installment or credit card transaction, made in the members of the public without regard to your official start regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)	Other
Other	Other
Cother      (Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PE  * You are not required to report loans from a commercia a retail installment or credit card transaction, made in the members of the public without regard to your official start regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD	Other
Other	Other
Cother      (Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PE  * You are not required to report loans from a commercia a retail installment or credit card transaction, made in the members of the public without regard to your official star regular course of business must be disclosed as follow  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000  \$1,001 - \$10,000	Other



## STATEMENT OF ECONOMIC INTERESTS

#### **COVER PAGE**

Date Injal Filing Received

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JUN 26 2019

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Please type or print in ink.

A PUBLIC DOCUMENT

IAME OF FILER	(LAST)	(FIRST)	(MIDDLE)
Ciardella	<u> </u>	.awrence	
. Office,	Agency, or Court		
Agency Na	ame (Do not use acronyms)		
City of I	Milpitas		
Division, E	Board, Department, District, if applicable		Your Position
Plannin	g Commission	· · · · · · · · · · · · · · · · · · ·	Commissioner
▶ If filing	for multiple positions, list below or on an attachmen	ent. (Do not us	e acronyms)
Agency: _			Position:
2. Jurisdi	ction of Office (Check at least one box)		
State			☐ Judge or Court Commissioner (Statewide Jurisdiction)
— Multi-C	County		County of
	Milpitas		Other
En Only of			
3. Type o	f Statement (Check at least one box)		4 40 0040
	nal: The period covered is January 1, 2018, throu December 31, 2018.	ıgh	Leaving Office: Date Left 4 16 2019 (Check one circle.)
-(	The period covered is	, through	<ul> <li>The period covered is January 1, 2018, through the date of -or-</li> </ul>
Assu	ming Office: Date assumed/		The period covered is/, through the date of leaving office.
☐ Cand	lidate: Date of Election a	nd office sought	, if different than Part 1:
4. Sched	ule Summary (must complete) ▶ 7	Total number	of pages including this cover page:
Sched	ules attached		
□s	chedule A-1 - Investments – schedule attached		Schedule C - Income, Loans, & Business Positions - schedule attached
□ s	chedule A-2 - Investments – schedule attached		Schedule D - Income - Gifts - schedule attached
☐ Se	chedule B - Real Property - schedule attached		Schedule E - Income - Gifts - Travel Payments - schedule attached
-or- ⊠ /	<b>None -</b> No reportable interests on any so	chedule	
5. Verifica	ition		
MAILING AI (Business o	DDRESS STREET or Agency Address Recommended - Public Document)	CITY	STATE ZIP CODE
	Calaveras Blvd.	Milpitas	CA 95035
	ELEPHONE NUMBER		EMAIL ADDRESS
•	) 586-3000		
herein an	d in any attached schedules is true and complete.	l acknowledge	
I certify	under penalty of perjury under the laws of the	State of Califor	nia that the foregoing is true and correct.
	June 26, 2019		
Date Sigi	ned	(	Signature
	monan day, your		



Please type or print in ink.

# STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

Date Initial Filing Received Official Use Only Clerk's Office

JUL 10 2019

NAME OF FILER (LAST)	(FIRST)	RECHIVED		
Mohsin	Zeya	Ot ply foreign and to the include Million		
1. Office, Agency, or Court				
Agency Name (Do not use acronyms)		·		
City of Milpitas				
Division, Board, Department, District, if app	licable Ye	our Position		
Planning Commission	(	Commissioner		
► If filing for multiple positions, list below	or on an attachment. (Do not use acronyn	ns)		
Agency:	F	Position:		
2. Jurisdiction of Office (Check at	least one box)			
☐ State		Judge or Court Commissioner (Statewide Jurisdiction)		
Multi-County		County of		
☑ City of Milpitas		Other		
City of		Other		
3. Type of Statement (Check at leas				
Annual: The period covered is Janua	ary 1, 2018, through	Leaving Office: Date Left 4 16 2019		
December 31, 2018.		(Check one circle.)		
	_/, through	<ul> <li>The period covered is January 1, 2018, through the date of -or-leaving office.</li> </ul>		
Assuming Office: Date assumed		○ The period covered is/, through the date of leaving office.		
Candidate: Date of Election	and office sought, if differe	nt than Part 1:		
4. Schedule Summary (must conschedules attached  ☑ Schedule A-1 - Investments – sch ☐ Schedule A-2 - Investments – sch	nedule attached Schedule attached Schedule attached Schedule	es including this cover page:2  ule C - Income, Loans, & Business Positions – schedule attached ule D - Income – Gifts – schedule attached		
Schedule B - Real Property – sch	edule attached Sched	ule E - Income - Gifts - Travel Payments - schedule attached		
-or- ☐ None - No reportable inte	rests on any schedule			
5. Verification				
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public	CITY : Document)	STATE ZIP CODE		
455 E. Calaveras Blvd.	Milpitas	CA 95035		
DAYTIME TELEPHONE NUMBER	EMAIL AI	DDRESS		
( 408 ) 586-3000				
herein and in any attached schedules is t	rue and complete. I acknowledge this is a			
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.				
Date Signed June 26, 2019	Signature			
(month, day, year)		(File the originally signed paper statement with your filing official.)		

### **SCHEDULE A-1**

#### Investments

# Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized. Do not attach brokerage or financial statements.

FAIR POLITICAL PRACTICES COMMIS	SION
Name	
Zeya Mohsin	

Do not attach brokerage of	manda statements.
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Cisco  GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
networking co.	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	(Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
S100,001 - \$1,000,000 Over \$1,000,000	
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	(Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
// 18// 18	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE  \$2,000 - \$10,000  \$10,001 - \$100,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//_18//_18_	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
Comments:	
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